combinations alongwith the names; and

(e) -vhat steps have been taken to withdraw those drugs from the market?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SA-ROJ KHAPARDE): (a) to (c) A sub-committee of the Drug Consultative Committee whic'h is a statutory body under the provisions of the Drug and Cosmetics Act, has been constituted to monitor formulations including combinations marketed in the country' from the angle of safety, efficiency and rationality.

(d) and (e) The Ministry of Health and Family Welfare had already issued Notifications prohibiting manufacture and sale of 26 categories of drugs/ drug combinations of which 9 categories of drugs/drug combinations were asked to be withdrawn on account of reported adverse reaction. The details of these 9 drugs are given in the enclosed Statement.. (See below) The screening is a continuous process

Statement

Details of nine Drugs withdrawn on Account of Reported Adverse Reactions

Name of the drug	Adverse effects
1. AMIDOPYRINE	Blood dyscrasia.
2. PHENACETIN	Adverse effect on Kidneys.
3. Topical preparations of Penicillin	Hypersensitive/allergic reactions.
4. Tetracycline liquid oral preparations.	Discolouration of teeth.
5. Oxytetracycline liquid oral preparations.	Do.
6. Demeclocycline liquid oral preparations	Do.
7. Practolol	Peritonitis.
8. Methaquolone	Drug abuse.
9. Methapyrelene	Potential carcinogenic in rats.

Sanitary conditions of C G'H. S Dispensary M. B Road Sectod I and IV, New Delhi

940. BHRI S. S. AHLUWALIA: Will tile Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether during the last year the *O* 5HS Officers made surprise checks in various CGHS Hospitals | dispensaries in Delhi]New Delhi;

(b) if so, their observations regarding sanitation in respect of each of the 'CGHS dispensaries particularly the dispensaries in M. B. Road Sectors I and IV, New Delhi ' and actoin so far taken against the concerned staff; and

(c) what action Government propose to inittiate to maintain good sanitary conditions in such health centres run by Government?

THE MINISTER OF STATE IN^ THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE); (a) Yes, Sir.

(b) and (c) By and large the sanitory conditions of CGHS dispensaries were satisfactory. Th$_e$ locations of M. B. Road dispensaries in Sector I and IV are not very conducive to satisfactory sanitory conditions and the matter has been taken up with the C. P. W. D.

Teaching at Guru Teig Bahadur Inadequate Infrastructure for Hospital, Shahdara

941. SHRI VISHWA" BHANDU GUPTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether lit is a fact that the students of 3rd year M. B. B. S. University College of Medical Sciences have made representation about inadequate infrastructure for clinical teaching at the Guru Teg Bahadur Hospital, Shahdara since there is no working operation theatre, no casualty, emergency services and no bed. or wards and no clinical teaching staff;

(b) lif so, what actionhas been taken by Government toaugment the infrastructure of the G. T. B. Hospital; and

(c) whether it is also a fact that the degree issued at the end of the carriculum may be derecognised by the Medical Council of India due to the short comings in the hospital?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY. WELFARE (KUMARI S1AROJ KHAPARDE): (a) and (b) The 3rd year students of University College of Medical Sciences have represented alleging lack of adequate infrastructure for clinical teaching at the Guru Teg Bahadur Hospital, Shahdara. The Delhi Administration has reported that arrangments exist for clinical teaching at Guru Tegh Bahadur Hospital and efficient OPD services, minor operation theatres and other supportive service facilities are already available. The Ap-ex Committee representatives of Delhi Administration, University of Delhi, Ministry of Health and Faminly Welfare have taken steps to ensure that additional ' clinical facilities required for 3rd year students are made available from 1st July 1967. A Committee has been formed to monitor the day to day progress in establishing additional infrastructural facilities in- the Hospital.

(c) The question of recognition of the. MBBS degree on a continuing basis granted by the Delhi University in respect of the students being trained at the University College of Medical Sciences will be considered after an inspection is carried out by the Medical Council of India in due course.

Air linking of Shimla

942. SHRI F. M. KHAN; Will the Minister of CIVIL AVIATION be pleased to state

- (a). by when Shimla is likely to be linked by air service to important cities in the country; and

(b) by when the airport at Shimla is likely to be ready, and the expenditure incurred thereon so far?

THE MINISTER OF STA'TE OF THE MINISTRY OF CIVIL AVIATION (SHRI JAGDISH TYTLER): (a) and (b) Subject to development of an air-field and provision of infrastructure, Vaydoot has plans to airlink Shimla during April 1987, by which time the runway and the temporary terminal building are likely to be ready. The expenditure incurred so far is Rs. 3 crores-approximately.